Image# 11971811429 PAGE 1 / 23

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Choose One)  Report Due On:  Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M6)  April 15 Quarterly Report (Q1)  X  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  Report Due On:  Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE  Primary (12P)  General (12G)  Runoff (12F)  PRE-Election Report for the:  Convention (12C)  Special (12S)				Office Use Only
ADDRESS (number and street)  Check if different than previously reported. (ACC)  Parsons  CITY   STATE   ZIP CODE   CO0484964  3. IS THIS REPORT (N) OR X (A)  AMENDED  CO0484964  4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1) X Quarterly Report (Q2) (C) 12-Day PRE-Election Report for the:  Cotober 15 Quarterly Report (Q3) Primary (12P) General (12G) Runoff (12F) Report (Q2) Cotober 15 Quarterly Report (Q3)		YPE OR PRINT ▼		12FE4M5
ADDRESS (number and street)  Check if different than previously reported. (ACC)  Parsons  CITY  STATE  ZIP CODE    C C00484964  3. IS THIS REPORT (N) OR  (A)  AMENDED (N) OR  (A)  TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  Parsons  TN 38363  - ITN 38363  AMENDED (N) OR  (A)  May 20 (M5) Aug 20 (M8) Nov 20 (M (Non-Election Year Only))  May 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M (Non-Election Year Only))  Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE PRE-Election Report for the:  Convention (12C) Special (12S)	THMCarePAC			1
ADDRESS (number and street)  Check if different than previously reported. (ACC)  Parsons  CITY  STATE  ZIP CODE    C C00484964  3. IS THIS REPORT (N) OR  (A)  AMENDED (N) OR  (A)  TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  October 15 Quarterly Report (Q3)				
ADDRESS (number and street)  Check if different than previously reported. (ACC)  Parsons  CITY  STATE  ZIP CODE    C C00484964  3. IS THIS REPORT (N) OR  (A)  AMENDED (N) OR  (A)  TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  October 15 Quarterly Report (Q3)				
than previously reported. (ACC)  Parsons  C C00484964  C C00484964  C C00484964  C C00484964  C CO0484964  C	ADDRESS (number and street)	P.O. Box 10		
22. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  C C00484964 3. IS THIS REPORT (N) OR ★ AMENDED (A)  4. TYPE OF REPORT (b) Monthly Report (Choose One) (a) Quarterly Reports:	Check if different			
C C00484964  3. IS THIS REPORT (N) OR X AMENDED (A)  4. TYPE OF REPORT (b) Monthly Report (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)  October 15 Quarterly Report (Q3)  3. IS THIS NEW (N) OR X AMENDED (A)  Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M (Non-Election Pear Only) Dec 20 (M)  Nov 20 (M) Non-Election (Non-Election Pear Only) Dec 20 (M9) Dec 20 (M9)  Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)  PRE-Election Report for the: Convention (12C) Special (12S)		Parsons		TN 38363
4. TYPE OF REPORT (Choose One)  (b) Monthly Report Due On:  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)  REPORT (N) OR  X (A)  May 20 (M5)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M7)  Nov 20 (M6)  Sep 20 (M9)  Dec 20 (M7)  April 15 Quarterly Report (Q1)  April 15 Quarterly Report (Q2)  Cotober 15 Quarterly Report (Q3)	2. FEC IDENTIFICATION NUM	<b>MBER</b> ▼C	CITY 🛦	STATE ▲ ZIP CODE ▲
(Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  (b) Mar 20 (M2)  Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Aug 20 (M8)  Aug 20 (M8)  Non-Election (Non-Election (Non-Ele	C C00484964	3.		
(a) Quarterly Reports:  April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)  Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M9) July 20 (M7) Oct 20 (M10) Jan 31 (YE Primary (12P) General (12G) Runoff (12F) Special (12S)		Report	eb 20 (M2) May 20 (M	(Non-Election
April 15 Quarterly Report (Q1)  X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)  PRE-Election Report for the: Convention (12C) Special (12S)	(a) Quarterly Reports:	Ma Ma	ar 20 (M3) Jun 20 (M	(Non-Election
X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) October 15 Quarterly Report (Q3) PRE-Election Report for the: Convention (12C) Special (12G) Runoff (12F) Special (12G) Runoff (12F)			pr 20 (M4) Jul 20 (M	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q2)  Report for the: Convention (12C)  Special (12S)  Quarterly Report (Q3)	July 15	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q3)	Quarterly Report (Q2)	)	Convention (12C)	Special (12S)
	Quarterly Report (Q3)	)	M M / D D	/ Y Y Y Y in the
January 31 Year-End Report (YE)  Election on State of		) Elect	tion on	
July 31 Mid-Year Report (Non-election Year Only) (MY)  (d) 30-Day  POST-Election Report for the:	Report (Non-election	POST-Election	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)  Termination Report in the Election on Election on State of		·		
5. Covering Period 04 01 2011 through 06 30 2011				
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.	I certify that I have examined this	Report and to the best	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer Jessica Redden	Type or Print Name of Treasurer	Jessica Redden		
Signature of Treasurer  Jessica Redden  [Electronically Filed] Date  M M M 11  02  2011	Signature of Treasurer Jessica	Redden	[Electronically Filed]	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g	NOTE: Submission of false, erroneo	ous, or incomplete informat	tion may subject the person signir	ng this Report to the penalties of 2 U.S.C. §437g.
Office Use Only	Use			

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **THMCarePAC** 04 2011 06 30 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 150255.10 January 1, 2011 (b) Cash on Hand at 168401.31 Beginning of Reporting Period..... 42707.33 20861.65 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 189262.96 192962.43 6(a) and 6(c) for Column B)..... 13900.00 17599.47 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 175362.96 175362.96 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	9940.00 10921.65 20861.65	Calendar Year-to-Date  16960.00  25747.33  42707.33
Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	10921.65 20861.65	25747.33 42707.33
(ii) Itemized (use Schedule A)	10921.65 20861.65	25747.33 42707.33
(ii) Unitemized	10921.65 20861.65	25747.33 42707.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)  Political Party Committees	20861.65	42707.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)  Political Party Committees	20861.65	
Political Party Committees  Other Political Committees (such as PACs)		
Other Political Committees (such as PACs)	0.00	0.00
Other Political Committees (such as PACs)		0.00
(such as PACs)		
	0.00	0.00
Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	20861.65	42707.33
y Committees	0.00	0.00
	0.00	0.00
oans Received	0.00	0.00
	0.00	
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	0.00
	0.00	0.00
	7	
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	7	
Non-Federal Account		
(from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	Totals to Line 33, page 5)	Totals to Line 33, page 5)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	10101 11104	Calcinal Teal-to-Date
(i) Federal Share	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	2500.00
Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	13900.00	15099.47
Federal Election Activity (2 U.S.C. §431(20))  (a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13900.00	17599.47
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	13900.00	17599.47

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	20861.65	42707.33
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20861.65	42707.33
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	FOR	LINE	PAGE	6	OF			
Use separate schedule(s) for each category of the	(che	ck only	or	ne)				
Detailed Summary Page	×	11a		11b		11c	12	
		12		1/		15	16	.

23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Tammie Arnold Date of Receipt Mailing Address 2565 Darden Christian Chapel Road 30 2011 06 City Zip Code State Transaction ID: SA11AI.4504 TN Darden 38328 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation THM Accountant Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Celeste Blocker Date of Receipt Mailing Address 307 Beverly Avenue 06 30 2011 City State Zip Code Transaction ID: SA11AI.4491 Hohenwald TN 38462 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Lewis County Nursing Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Blake Carrington Date of Receipt Mailing Address 707 Cherokee Drive 30 06 2011

455.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

360.00

Zip Code

37134

State

TN

Occupation Administrator

Aggregate Year-to-Date ▼

С

180.00

Transaction ID: SA11AI.4499

Amount of Each Receipt this Period

City

New Johnsonville

Name of Employer

Forest Cove Nursing Receipt For:

Primary

FEC ID number of contributing

Other (specify)

General

federal political committee.

	FO	R LINE	NU	MBER	:	PAGE	-	1	OF	23
Use separate schedule(s)	(ch	eck only	or	ne)						
for each category of the Detailed Summary Page	>	<b>1</b> 1a		11b		11c		12		
,g.		13		14		15		16		717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Nancy Cathey Date of Receipt Mailing Address 720 Franklin Ave 06 30 2011 City State Zip Code Transaction ID: SA11AI.4501 TN 38351 Lexington Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation Westwood Health Care RN Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) B. Amy Cruse Date of Receipt Mailing Address 646 Tommy Goodman Road 06 30 2011 City State Zip Code Transaction ID: SA11AI.4486 TN **Parsons** 38363 Amount of Each Receipt this Period FEC ID number of contributing 120.00 federal political committee. Name of Employer Occupation Ampharm Human Resource Mgr Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify)

Full Name (Last, First, Middle Initial) c. David Davis Date of Receipt Mailing Address 184 Fisher Drive 30 2011 06 Zip Code City State Transaction ID: SA11AI.4477 TN **Parsons** 38363 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Occupation COO THM Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)		7		7		99	0.00	
TOTAL This Period (last page this line number only)		7		7	_	_	_	

1650.00

Primary

Other (specify)

General

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) (check only one)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar		
NAME OF COMMITTEE (In Full) THMCarePAC		
Primary General Other (specify) ▼	38363 ation	Date of Receipt  06 30 2011  Transaction ID: SA11AI.4505  Amount of Each Receipt this Period  125.00
Full Name (Last, First, Middle Initial)  Colleen Derrington  Mailing Address Rt 4 Box 25H  City State Parsons TN  FEC ID number of contributing federal political committee.  Name of Employer THM Docume  Receipt For: Primary General Other (specify) ▼  Aggreg	38363 ation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Tammy Faulkner  Mailing Address 325 Reeds Levee Road  City State    McKenzie TN  FEC ID number of contributing federal political committee.  Name of Employer THM RN  Receipt For:    Primary General    Other (specify)   OCCUPATION Aggreg	38261	Date of Receipt  06 30 2011  Transaction ID: SA11AI.4508  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		475.00
TOTAL This Period (last page this line number only)		

	FO	R LINE	NU	MBER	PAGE	Ξ	9	OF	:	23	
Use separate schedule(s) for each category of the	l `	eck only	or	ne)				_			
Detailed Summary Page	>	11a		11b		11c		12			
,		13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Michael Hammond Date of Receipt Mailing Address 815 Georgia Ave S 30 2011 06 City State Zip Code Transaction ID: SA11AI.4509 TN **Parsons** 38363 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation THM Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Hogan Date of Receipt Mailing Address 135 Betsy Drive 06 30 2011 City State Zip Code Transaction ID: SA11AI.4474 TN Savannah 38372 Amount of Each Receipt this Period FEC ID number of contributing C 210.00 federal political committee. Name of Employer Occupation Savannah Health Care Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Judy Hollingsworth Date of Receipt Mailing Address PO Box 597

275.00

Zip Code

38030

State

TN

Occupation

Legal Nurse

Aggregate Year-to-Date ▼

C

2011

125.00

30

Transaction ID: SA11AI.4510

Amount of Each Receipt this Period

06

City

Finley

THM

Receipt For:

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

	FO	R LINE	NU	MBER	:	PAGE	•	10 OF	=	23
Use separate schedule(s)	(ch	eck only	or	ne)						
for each category of the Detailed Summary Page	>	<b>1</b> 1a		11b		11c		12		
,g.		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) **Brad Hopkins** Date of Receipt Mailing Address 589 Westport 30 2011 06 City State Zip Code Transaction ID: SA11AI.4473 TN Holladay 38341 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Contribution Name of Employer Occupation Pharmacist **Ampharm** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Heather Lansaw Date of Receipt Mailing Address 2675 Bradford Pear Lane 06 30 2011 City State Zip Code Transaction ID: SA11AI.4511 **Union City** TN 38261 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation THM Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Joe Lemay Date of Receipt Mailing Address 216 Woodside Lane 30 2011 06 City State Zip Code Transaction ID: SA11AI.4498 TN Dyersburg 38024 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation Administrator **Dyersburg Manor** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 520.00 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	MBER	:	PAGE	_ ′	11 OF	23
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	×	11a		11b		11c		12	
		13		14		15		16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Eric d Lewis Date of Receipt Mailing Address 174 Sego Lane 30 2011 06 City State Zip Code Transaction ID: SA11AI.4512 TN 38351 Lexington Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation THM Bookkeeper Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joe Luna Date of Receipt Mailing Address PO Box 256 06 30 2011 City State Zip Code Transaction ID: SA11AI.4487 TN 37096 Linden Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Name of Employer Occupation Ampharm Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Rhonda Maness Date of Receipt Mailing Address 4615 Bible Grove Road 30 2011 06 Zip Code City State Transaction ID: SA11AI.4488 TN Lexington 38351 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation RN Ampharm Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FEC Schedule A (Form 3X) Rev. 02/2003

370.00

	F	ЭR	LINE	NU	MBER	:	PAGE	•	12 OF	23
Use separate schedule(s)	(с	he	ck only	or	ne)					
for each category of the Detailed Summary Page		X	11a		11b		11c		12	
,			13		14		15		16	17

ny information copied from such Reports a r for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	•	
> THMCarePAC		
Full Name (Last, First, Middle Initial)  Annette McClary		Date of Receipt
Mailing Address 7625 Mint Leaf Drive		mam / Dab / Yayayay
City	State Zip Code	06 30 2011 Transaction ID : SA11AI.4478
Antioch	TN 37013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
THM	Director of Rehab Services	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) Richard McCormick	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
Mailing Address 1235 Thorntree Drive		06 30 2011
City	State Zip Code	Transaction ID : SA11AI.4475
Dyersburg	TN 38024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	360.00
Name of Employer	Occupation	1
Northbrooke Health Care  Receipt For:	Administrator	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	720.00	
Full Name (Last, First, Middle Initial)  Beverly Montgomery	•	Date of Receipt
Mailing Address 1270 Harrington Road		06 30 2011
City Scotts Hill	State Zip Code TN 38374	Transaction ID : SA11AI.4479  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer	Occupation	
THM	Adminstrator	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify)	825.00	
SUBTOTAL of Receipts This Page (ontional	I)	985.00
	,	
OTAL This Period (last page this line num	ber only)	7 7 7

FOR LINE NUMBER: PAGE 13 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Joy Montgomery Date of Receipt Mailing Address 41 Stokes Lane 30 2011 06 City State Zip Code Transaction ID: SA11AI.4489 TN Bath Springs 38311 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation RN **Decatur County Manor** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Munchow Date of Receipt Mailing Address 3744 Westridge Cove 06 30 2011 City State Zip Code Transaction ID: SA11AI.4476 TN **Bartlett** 38135 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Applingwood Adminstrator Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jeffery Parrish Date of Receipt Mailing Address 11555 Sardis Road 30 06 2011 City Zip Code State Transaction ID: SA11AI.4481 TN Scotts Hill 38374 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation THM Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 1420.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FO	R LINE	NU	MBER	:	PAGE	. 1	14 OF	23
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for each category of the Detailed Summary Page	×	11a		11b		11c		12	
		13		14		15		16	17

Any information copied from	such Reports and Statements	may not be sold or used	by any person for the purpose	of soliciting contributions
or for commercial purposes,	other than using the name and	d address of any political	I committee to solicit contribution	s from such committee.
NAME OF COMMITTEE	(In Full)			

or for commercial purposes, other than using the	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THMCarePAC		
Full Name (Last, First, Middle Initial)  Selena Pevahouse  Mailing Address 110 Miller Drive		Date of Receipt
City Clifton  FEC ID number of contributing federal political committee.  Name of Employer  THM  Receipt For:  Primary General Other (specify) ▼	State Zip Code TN 38425  C  Occupation RN  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.4513  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial)  Peggy Pippin  Mailing Address 120 Womack Ave  City  Cookeville  FEC ID number of contributing federal political committee.  Name of Employer THM  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 38501  C  Occupation Administrator  Aggregate Year-to-Date ▼  245.00	Date of Receipt  06 30 2011  Transaction ID : SA11Al.4514  Amount of Each Receipt this Period  125.00
Full Name (Last, First, Middle Initial)  Julie Roberts  Mailing Address 2442 East Grove Road  City Gleason  FEC ID number of contributing federal political committee.  Name of Employer McKenzie Health Care Receipt For:  Primary General Other (specify)	State Zip Code TN 38229  C  Occupation Administrator  Aggregate Year-to-Date ▼  300.00	Date of Receipt  M M M / 30
SUBTOTAL of Receipts This Page (optional)		375.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 15 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Lee Rooney Date of Receipt Mailing Address 3411 Shenandoah Lane 30 2011 06 City Zip Code State Transaction ID: SA11AI.4516 TN Cookeville 38506 Amount of Each Receipt this Period FEC ID number of contributing C 180.00 federal political committee. Name of Employer Occupation Administrator Bethesda Health Care Center Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Sherwood Date of Receipt Mailing Address 1416 Friar Tuck Drive 06 30 2011 City State Zip Code Transaction ID: SA11AI.4492 TN Union City 38261 Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation VanAyer Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Smith Date of Receipt Mailing Address PO Box 458 30 06 2011 Zip Code City State Transaction ID: SA11AI.4482 TN **Parsons** 38363 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation CEO THM Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOF	R LINE	NU	<b>MBER</b>	:	PAGE	•	16 O	F	23
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,,g.		13		14		15		16		717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Kyle Smith Date of Receipt Mailing Address 6314 Three Way Road 30 2011 06 City State Zip Code Transaction ID: SA11AI.4490 TN 38329 Decaturville Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation Administrator **Decatur County Manor** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Becky Spray Date of Receipt Mailing Address 1320 Sutton Road 06 30 2011 City State Zip Code Transaction ID: SA11AI.4519 TN 38063 Ripley Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation THM RNReceipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joesph Strawn Date of Receipt Mailing Address 80 Dodd Street 30 2011 06 Zip Code City State Transaction ID: SA11AI.4483 TN Lexington 38351 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Project Director** THM Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 620.00 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 17 OF 23

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) THMCarePAC		
Lexington  FEC ID number of contributing federal political committee.  Name of Employer  Northbrook Health Care  So	State Zip Code TN 38351  C ccupation ocial Services ggregate Year-to-Date ▼ 300.00	Date of Receipt  06 30 2011  Transaction ID: SA11AI.4500  Amount of Each Receipt this Period
Alamo  FEC ID number of contributing federal political committee.  Name of Employer THM Ma	State Zip Code TN 38001  C ccupation arketing ggregate Year-to-Date ▼	Date of Receipt  06 30 2011  Transaction ID : SA11AI.4484  Amount of Each Receipt this Period  250.00
Bath Springs  FEC ID number of contributing federal political committee.  Name of Employer  THM  Additional Contributing federal political committee.	State Zip Code TN 38311  C ccupation ccountant ggregate Year-to-Date ▼ 2200.00	Date of Receipt  06 30 2011  Transaction ID: SA11AI.4485  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		1400.00
TOTAL This Period (last page this line number only	)	

	FO	R LINE	NU	IMBER	:	PAGE	•	18 OF	-	23
Use separate schedule(s)	(ch	eck only	or	ne)						
for each category of the Detailed Summary Page	>	<b>1</b> 1a		11b		11c		12		
,g.		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Melinda Wade Date of Receipt Mailing Address 486 Kenneth Graves Lane 30 2011 06 City State Zip Code Transaction ID: SA11AI.4502 TN 38363 **Parsons** Amount of Each Receipt this Period FEC ID number of contributing C 120.00 federal political committee. Name of Employer Occupation Administrator McNairy County Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Stacy Wallace Date of Receipt Mailing Address 8589 Blue Creek Circle 06 30 2011 City State Zip Code Transaction ID: SA11AI.4515 TN 38053 Millington Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Bright Glade Health Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charlotte Webb Date of Receipt Mailing Address 1645 Florence Road 30 2011 06 City State Zip Code Transaction ID: SA11AI.4495 TN Savannah 38372 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Name of Employer Occupation Administrator in Training Savannah Health Care and Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 150.00 420.00 SUBTOTAL of Receipts This Page (optional).....

9

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF 23 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) THMCarePAC Full Name (Last, First, Middle Initial) Maurisha Yarbro Date of Receipt Mailing Address 3347 Marshall Road 30 2011 06 City State Zip Code Transaction ID: SA11AI.4497 TN 38058 Munford Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Name of Employer Occupation RN Applingwood Health Care Center Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 9940.00 TOTAL This Period (last page this line number only).....

TEMIZED DISBURSEMENTS	Hoo concrete ask adult /-	FOR LINE	
. LLLD DIODOTTOLIVILITIO	Use separate schedule(s for each category of the Detailed Summary Page	21b	22 23 24 25 2
Any information copied from such Reports and State			on for the purpose of soliciting contributions
or for commercial purposes, other than using the na	me and address of any polit	ical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THMCarePAC			
Full Name (Last, First, Middle Initial)			
· Jim Coley			Date of Disbursement
Mailing Address 2498 KENWOOD LANE			06 22 2011
City	State Zip Code		Towns at the ID ODGS 4450
Bartlett	TN 38134		Transaction ID: SB29.4459
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Senate President	ment For:  Primary General  Other (specify)		
State: TN District: 97			
Full Name (Last, First, Middle Initial)  - Jimmy Eldridge			Date of Disbursement
Mailing Address 29 EMERALD LAKE DRIVE			06 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		
City Jackson	TN 38305		Transaction ID : SB29.4461
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Office Sought:  House Senate President State: TN District: 73	ment For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)  - STEVE FINCHER			Date of Disbursement
Mailing Address PO BOX 11153			06 30 7 2011
City JACKSON	State Zip Code TN 38308		Transaction ID : SB29.4467
		011	
Purpose of Disbursement Contribution			Amount of Each Dishursement this Period
Purpose of Disbursement		Category/	Amount of Each Disbursement this Period 2400.00
Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate President	ment For: Primary General Other (specify)		
Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate	Primary General	Category/	
Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate President	Primary General Other (specify) ▼	Category/ Type	

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 21 OF 23
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)	
			Summary Page	21b	22	23 24 25 26
				27	28a	28b 28c X 29 30b
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam					
	NAME OF COMMITTEE (In Full)					
	THMCarePAC					
_	Full Name (Last, First, Middle Initial)					
Α.	Curtis Halford				Date of Dis	bursement
	Mailing Address 127 OLD DYER TRENTON ROAD				06	22 2011
	City	State	Zip Code		Transaction	on ID : SB29.4457
	Dyer	TN	38330		Halisacii	UII ID . 3023.4437
	Purpose of Disbursement Contribution			011	Amount of I	Each Disbursement this Period
	Candidate Name			Category/ Type		500.00
	Office Sought:	nent For:		Турс		, , , , , , , , , , , , , , , , , , , ,
		Primary	General			
		Other (spec	cify) 🔻			
_	State: TN District: 79					
Б	Full Name (Last, First, Middle Initial)				Data of Dia	h
Ь.	Jon Lundberg				Date of Dis	
	Mailing Address 212 SKYLINE DRIVE				06	22 2011
	City S Bristol	State TN	Zip Code 37620		Transaction	on ID : SB29.4471
	Purpose of Disbursement Contribution			011	Amount of I	Each Disbursement this Period
	Candidate Name			Category/	-	
				Type		500.00
	Office Sought: House Disbursen	nent For:				
		Primary	General			
	President State: TN District: 01	Other (spec	city) ▼			
_	Full Name (Last, First, Middle Initial)					
C.	Debra Maggart				Date of Dis	
	Mailing Address 112 LA BAR DRIVE				06	22 2011
	City	State	Zip Code			
	Hendersonville	TN	37075		Transaction	on ID : SB29.4455
	Purpose of Disbursement Political Contribution			011	A	Fach Diskumannant this Deviced
	Candidate Name			Category/ Type	Amount of t	Each Disbursement this Period 1000.00
	Office Sought:	nent For:		71		, , , , , , , , , , , , , , , , , , , ,
	Senate	Primary	General			
		Other (spec	cify) ▼			
	State: TN District: 45					
8	SUBTOTAL of Disbursements This Page (optional)					2000.00
$\vdash$						
Т	OTAL This Period (last page this line number only)					, ,

SCHEDULE B (FEC Form 3X)	115-1-1-1	FOR LINE	NUMBER: PAGE 22 OF 23
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c <b>X</b> 29 3
Any information copied from such Reports and State	ments may not be sold or use	ed by any perso	
or for commercial purposes, other than using the nar	me and address of any politic	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Full Name (Last, First, Middle Initial)			
A. Steve McManus			Date of Disbursement
Mailing Address 405 RIVEREDGE DRIVE			06 22 2011
City	State Zip Code		Transaction ID - CD00 44CF
Cordova	TN 38018		Transaction ID : SB29.4465
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	500.00
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: TN District: 96	( 1 ) , <b>V</b>		
Full Name (Last, First, Middle Initial)			
3. TENNESSEE REPUBLICAN PAR	TY		Date of Disbursement
Mailing Address 2424 21ST AVENUE SUITE 200			06 15 2011
City NASHVILLE	State Zip Code TN 37212		Transaction ID : SB29.4453
Purpose of Disbursement Contribution			
Candidate Name		011	Amount of Each Disbursement this Period
		Category/ Type	2500.00
Office Sought: House Disburse	ment For:		
Senate	Primary General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
The Council of State Governments	3		Date of Disbursement
Mailing Address 2760 Research Park Drive PO Box 11910			06 02 7 2011
T O DOX 11310	State Zip Code		Transaction ID : SB29.4451
City			Transaction ID: SB29.4451
Lexington	KY 40578-1910		
	KY 40578-1910	012	Assessed of Early Disharmon and this David
Lexington Purpose of Disbursement	KY 40578-1910	012	Amount of Each Disbursement this Period
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name		012 Category/ Type	Amount of Each Disbursement this Period 5000.00
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name  Office Sought: House Disburse	ment For:	Category/	
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name  Office Sought: House Senate	ment For: Primary General	Category/	
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name  Office Sought: House Disburse Senate President	ment For:	Category/	
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name  Office Sought: House Disburse Senate President	ment For: Primary General	Category/	
Lexington Purpose of Disbursement Sponsoring Southern Legislative Conference 2011 Candidate Name  Office Sought: House Senate President	ment For: Primary General Other (specify) ▼	Category/ Type	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 23 OF
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 23 24 25 29 28a 28b 28c <b>X</b> 29
Any information copied from such Reports and Staten	I nents may not be sold or use	d by any perso	
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
THMCarePAC			
Full Name (Last, First, Middle Initial)			
A. Mark White			Date of Disbursement
Mailing Address 1661 AARON BRENNER DR. Suite 300			06 22 2011
City	State Zip Code		Transaction ID : SB29.4463
Memphis	TN 38120		Transaction ib . 3525.4403
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Peri
Candidate Name		Category/	500.00
		Type	500.00
Office Sought: House Disbursen Senate	nent For:  Primary General		
	Other (specify)		
State: TN District: 83			
Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Per
Candidate Name		Category/ Type	
Office Sought: House Disbursen	nent For:	туре	
Senate	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C.			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
r dipose of Biobarcomonic			Amount of Each Disbursement this Peri
Candidate Name		Category/ Type	Amount of Each Disbursement this Fell
Office Sought: House Disbursen	nent For:	туре	
	Primary General		
	Other (specify) ▼		
State: District:			
			500.00
SUBTOTAL of Disbursements This Page (optional)		·····•	300.00
TOTAL This Period (last page this line number only)			13900.00
( , , )			